

## **Kansas Prescription Drug Monitoring Program**

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## K-TRACS: Data Requester Certification Form K-20

## **INSTRUCTIONS**

This form is for use by healthcare practitioners only. K.S.A. 65-1682 defines practitioners as those licensed to prescribe or dispense scheduled substances and drugs of concern. Delegates should use Form K-30: Data Requester Notary Form.

To be granted access to the K-TRACS database, you must register online and **this form must be filled out in its entirety and signed.** You may then upload this form to your account, fax it to (785) 296-8420 or email it to pmpadmin@ks.gov. Once this form is uploaded, the K-TRACS office will verify your information. Completion of this form or your online registration does not guarantee approval.

After you receive your account information, you may begin requesting reports. **Be sure to keep your password in a safe place and do not share your login information with anyone.** If you have any questions or need assistance in accessing the K-TRACS system, please feel free to contact K-TRACS at (785) 296-6547 or pmpadmin@ks.gov.

CURRENT INFORMATION	
Last Name	
Email address	
as that all information on my online data requester registration is tion will be used for legitimate purposes. I understand that all data alth Information and handled in accordance with all federal and disclosure of any data that is obtained. Additionally, I understand received from the K-TRACS database is a violation of state law, charges and/or revocation of my database access privileges.	
DATE SIGNED	

**Disclaimer:** The information in the K-TRACS database may contain errors resulting from the reporting of information received. The K-TRACS staff suggests that additional independent verification of patient profile information with pharmacies and prescribers may sometimes be prudent or necessary.